

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

National Nurses United PAC - A Fund for a Healthy America

ADDRESS (number and street)

8630 Fenton Street, Suite 1100

☐ Check if different than previously reported. (ACC)

Silver Spring

MD

20910

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00446237

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

CA

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Carolyn Hietamaki

Signature of Treasurer

Carolyn Hietamaki

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

### FEC FORM 3X

Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Nurses United PAC - A Fund for a Healthy America

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 18 / 2012 To: M M / D D / Y Y Y Y Y Y  
11 / 26 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		37626.84
(b) Cash on Hand at Beginning of Reporting Period.....	24343.61	
(c) Total Receipts (from Line 19) .....	4955.63	46167.19
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	29299.24	83794.03
7. Total Disbursements (from Line 31) .....	26871.53	81366.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2427.71	2427.71
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

National Nurses United PAC - A Fund for a Healthy America

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	1	2

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1635.00	8133.00
(ii) Unitemized .....	3056.50	36997.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4691.50	45130.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	4691.50	45130.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	264.13	1037.19
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	4955.63	46167.19
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4955.63	46167.19

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	371.53	1366.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	371.53	1366.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26500.00	79000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	1000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	26871.53	81366.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26871.53	81366.32

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4691.50	45130.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4691.50	45130.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	371.53	1366.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	264.13	1037.19
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	107.40	329.13

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Shawn Bartlett**

Mailing Address 108 Sophys Ct,

City

Roseville

State

CA

Zip Code

95747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609329**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Shawn Bartlett**

Mailing Address 108 Sophys Ct,

City

Roseville

State

CA

Zip Code

95747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647907**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Rita Batchley**

Mailing Address 4485 Wooster St

City

Ventura

State

CA

Zip Code

93003-1934

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 11 / 2012

**Transaction ID : C4612521**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 45  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

## **A. Gail Bean**

Mailing Address 66 Sherwood Ave

City  
Westfield

State  
MA

Zip Code  
01085-1761

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Noble Hospital

Occupation

Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 14 / 2012

**Transaction ID : C4615040**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **B. James R. Bialke**

Mailing Address 2234 Stinson Blvd

City

Minneapolis

State

MN

Zip Code

55418-4039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

National Nurses United

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609369**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. James R. Bialke**

Mailing Address 2234 Stinson Blvd

City

Minneapolis

State

MN

Zip Code

55418-4039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

National Nurses United

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647935**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

## **A. Carolyn Bowden**

Mailing Address 7908 Winthorpe St

City State Zip Code  
Oakland CA 94605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

**Transaction ID : C4609353**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Carolyn Bowden**

Mailing Address 7908 Winthorpe St

City State Zip Code  
Oakland CA 94605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 15 / 2012

**Transaction ID : C4647941**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Michael Brannan**

Mailing Address P.O. Box 623

City State Zip Code  
Oakland CA 94604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

**Transaction ID : C4609337**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Michael Brannan**

Mailing Address P.O. Box 623

City State Zip Code  
 Oakland CA 94604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647908**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. David Brown**

Mailing Address 26015 Salinger Ln

City State Zip Code  
 Stevenson Ranch CA 91381-1102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Newhall Memorial Hospital

Occupation

Clinical Registered Nurse

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 05 / 2012

**Transaction ID : C4604306**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**c. Deborah Burger**

Mailing Address 13172 Dupont Rd

City State Zip Code  
 Sebastopol CA 95472-9786

FEC ID number of contributing  
federal political committee.

C

Name of Employer

California Nurses Asso

Occupation

RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

11 / 14 / 2012

**Transaction ID : C4615034**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Kathy Carder**

Mailing Address 1026 Pleasant View

City State Zip Code  
 Venice CA 90291

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Nursing Practice Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609354

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. Kathy Carder**

Mailing Address 1026 Pleasant View

City State Zip Code  
 Venice CA 90291

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Nursing Practice Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

11 / 15 / 2012

Transaction ID : C4647940

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. Leslie Curtis**

Mailing Address 5029 Rosecrest Drive

City State Zip Code  
 Pittsburg PA 60608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609355

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶

90.00

**TOTAL** This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Leslie Curtis**

Mailing Address 5029 Rosecrest Drive

City

Pittsburg

State

PA

Zip Code

60608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

11 / 15 / 2012

Transaction ID : C4647928

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Gerard Daley**

Mailing Address 16907 W. Sunset Blvd

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609338

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Gerard Daley**

Mailing Address 16907 W. Sunset Blvd

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

Transaction ID : C4647909

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Farah Davari**

Mailing Address 10516 Almayo Ave

City State Zip Code  
 Los Angeles CA 90064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609356

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Farah Davari**

Mailing Address 10516 Almayo Ave

City State Zip Code  
 Los Angeles CA 90064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

11 / 15 / 2012

Transaction ID : C4647939

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Linette Davis**

Mailing Address 4505 Shafter Ave

City State Zip Code  
 Oakland CA 94609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Educator/Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609339

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

70.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 45  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Linette Davis**

Mailing Address 4505 Shafter Ave

City State Zip Code  
Oakland CA 94609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Educator/Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 15 / 2012

**Transaction ID : C4647910**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Ayesha E Dillon**

Mailing Address 3375 Carlson Boulevard  
Apartment #4

City State Zip Code  
El Cerrito CA 94530-3940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser Richmond Clinic

Occupation

Staff Nurse li

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 22 / 2012

**Transaction ID : C4609234**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**c. Ayesha E Dillon**

Mailing Address 3375 Carlson Boulevard  
Apartment #4

City State Zip Code  
El Cerrito CA 94530-3940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser Richmond Clinic

Occupation

Staff Nurse li

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 05 / 2012

**Transaction ID : C4647536**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Ayesha E Dillon**

Mailing Address 3375 Carlson Boulevard  
 Apartment #4

City State Zip Code  
 El Cerrito CA 94530-3940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Kaiser Richmond Clinic

Occupation  
 Staff Nurse li

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2012

**Transaction ID : C4647881**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Diane Dombroski**

Mailing Address 38923 Stanridge Ave.

City State Zip Code  
 Palmdale CA 93550-3242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Antelope Valley

Occupation  
 Critical Care Rn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : C4609318**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Diane Dombroski**

Mailing Address 38923 Stanridge Ave.

City State Zip Code  
 Palmdale CA 93550-3242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Antelope Valley

Occupation  
 Critical Care Rn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2012

**Transaction ID : C4647620**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Thomas Dunne**

Mailing Address 3050 Stanton Ave

City

Berkeley

State

CA

Zip Code

91222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NNU

Occupation

Labor Rep

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609370

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Thomas Dunne**

Mailing Address 3050 Stanton Ave

City

Berkeley

State

CA

Zip Code

91222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NNU

Occupation

Labor Rep

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

11 / 15 / 2012

Transaction ID : C4647942

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Benjamin Elliott**

Mailing Address 201 11th Ave #8

City

San Francisco

State

CA

Zip Code

94118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609340

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 45  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Benjamin Elliott**

Mailing Address 201 11th Ave #8

City State Zip Code  
 San Francisco CA 94118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647911**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Elisabeth Fiekowsky**

Mailing Address 2855 Old Gravenstein Hwy

City State Zip Code  
 Sebastapol CA 95473

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609357**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Elisabeth Fiekowsky**

Mailing Address 2855 Old Gravenstein Hwy

City State Zip Code  
 Sebastapol CA 95473

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647936**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

## **A. Carmen Figueroa**

Mailing Address 245 So. 12th Street

City State Zip Code  
 San Jose CA 95112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : C4609358**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **B. Carmen Figueroa**

Mailing Address 245 So. 12th Street

City State Zip Code  
 San Jose CA 95112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2012

**Transaction ID : C4647929**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. Jerry Fillingim**

Mailing Address 753 Keeler Ave

City State Zip Code  
 Berkeley CA 94708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : C4609359**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Jerry Fillingim**

Mailing Address 753 Keeler Ave

City  
Berkeley

State Zip Code  
CA 94708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647930**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. William Gallagher**

Mailing Address 388 Museum Drive

City  
Los Angeles

State Zip Code  
CA 90065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609341**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. William Gallagher**

Mailing Address 388 Museum Drive

City  
Los Angeles

State Zip Code  
CA 90065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647913**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

40.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Nakia George**

Mailing Address 3001 S. Apple Ct.

City

Antioch

State

CA

Zip Code

94509

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Data Services Rep

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609342

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Nakia George**

Mailing Address 3001 S. Apple Ct.

City

Antioch

State

CA

Zip Code

94509

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Data Services Rep

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

Transaction ID : C4647914

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Vera George**

Mailing Address 2526 Sherwood Drive

City

San Bruno

State

CA

Zip Code

94066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Secretary

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609360

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

40.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Vera George**

Mailing Address 2526 Sherwood Drive

City State Zip Code  
 San Bruno CA 94066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647931**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Susanna Gonzalez**

Mailing Address 5310 Proctor Lane

City State Zip Code  
 Castro Valley CA 94546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Administration Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609343**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Susanna Gonzalez**

Mailing Address 5310 Proctor Lane

City State Zip Code  
 Castro Valley CA 94546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Administration Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647915**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

40.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Tina Lynne Grieger**

Mailing Address 32727 Dorama Ave

City State Zip Code  
Acton CA 93510

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609344**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Tina Lynne Grieger**

Mailing Address 32727 Dorama Ave

City State Zip Code  
Acton CA 93510

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647916**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Michelle Grisat**

Mailing Address 50 Landers St

City State Zip Code  
San Francisco CA 94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Educator/Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609361**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

40.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Michelle Grisat**

Mailing Address 50 Landers St

City

San Francisco

State

CA

Zip Code

94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Educator/Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647932**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Marcia E. Hogue**

Mailing Address 8609 Hawley Way

City

Elk Grove

State

CA

Zip Code

95624-4575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser So Sac

Occupation

STAFF NURSE III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

10 / 22 / 2012

**Transaction ID : C4609235**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Marcia E. Hogue**

Mailing Address 8609 Hawley Way

City

Elk Grove

State

CA

Zip Code

95624-4575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser So Sac

Occupation

STAFF NURSE III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

11 / 05 / 2012

**Transaction ID : C4647538**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Marcia E. Hogue**

Mailing Address 8609 Hawley Way

City

Elk Grove

State

CA

Zip Code

95624-4575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser So Sac

Occupation

STAFF NURSE III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

11 / 16 / 2012

**Transaction ID : C4647882**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Shelia Ibanez**

Mailing Address 3732 Fruitvale Ave

City

Oakland

State

CA

Zip Code

94602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Confidential Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609345**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Shelia Ibanez**

Mailing Address 3732 Fruitvale Ave

City

Oakland

State

CA

Zip Code

94602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Confidential Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647917**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 45  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Mohammad Kashmiri**

Mailing Address 561 Oakland Ave #107

City State Zip Code  
Oakland CA 94611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609362**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Mohammad Kashmiri**

Mailing Address 561 Oakland Ave #107

City State Zip Code  
Oakland CA 94611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647937**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Kathleen A Keith**

Mailing Address 5895 97 Circle North

City State Zip Code  
Pinellas Park FL 33782

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Northside

Occupation

RN Progressive Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

10 / 29 / 2012

**Transaction ID : C4609315**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 45  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Kathleen A Keith**

Mailing Address 5895 97 Circle North

City State Zip Code  
 Pinellas Park FL 33782

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Northside

Occupation

RN Progressive Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 09 / 2012

Transaction ID : C4647622

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Kathleen A Keith**

Mailing Address 5895 97 Circle North

City State Zip Code  
 Pinellas Park FL 33782

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Northside

Occupation

RN Progressive Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 21 / 2012

Transaction ID : C4649678

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Paula Littles**

Mailing Address 5712 Netleaf Rd

City State Zip Code  
 Austin TX 78724

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609363

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

45.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Paula Littles**

Mailing Address 5712 Netleaf Rd

City  
Austin

State  
TX

Zip Code  
78724

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647938**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Cynthia Loudin**

Mailing Address 2077 N. Hoyne Ave

City  
Chicago

State  
IL

Zip Code  
60647

FEC ID number of contributing  
federal political committee.

C

Name of Employer

National Nurses United

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609352**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Cynthia Loudin**

Mailing Address 2077 N. Hoyne Ave

City  
Chicago

State  
IL

Zip Code  
60647

FEC ID number of contributing  
federal political committee.

C

Name of Employer

National Nurses United

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647918**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

45.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 45  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Shelly-Ann A Lynch-Small**

Mailing Address 3050 52nd Ave S

City

St Petersburg

State

FL

Zip Code

33713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Northside

Occupation

RN Critical Care

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

10 / 29 / 2012

Transaction ID : C4609316

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Shelly-Ann A Lynch-Small**

Mailing Address 3050 52nd Ave S

City

St Petersburg

State

FL

Zip Code

33713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Northside

Occupation

RN Critical Care

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 09 / 2012

Transaction ID : C4647623

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**c. Shelly-Ann A Lynch-Small**

Mailing Address 3050 52nd Ave S

City

St Petersburg

State

FL

Zip Code

33713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Northside

Occupation

RN Critical Care

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 21 / 2012

Transaction ID : C4649679

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

## **A. Margaret Marks**

Mailing Address 1507 Visalia

City Albany State CA Zip Code 94707

FEC ID number of contributing federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Executive Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609346

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **B. Margaret Marks**

Mailing Address 1507 Visalia

City Albany State CA Zip Code 94707

FEC ID number of contributing federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Executive Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

Transaction ID : C4647919

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **C. Yakini Martin**

Mailing Address 3541 37th Street

City Sacramento State CA Zip Code 95817

FEC ID number of contributing federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609347

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 45  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Yakini Martin**

Mailing Address 3541 37th Street

City State Zip Code  
 Sacramento CA 95817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2012

**Transaction ID : C4647920**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Kay McVay**

Mailing Address 3644 S Ranchford Ct

City State Zip Code  
 Concord CA 94520-1416

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2012

**Transaction ID : C4615047**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Lynn E. O'Connor**

Mailing Address 1001 Eagle Avenue

City State Zip Code  
 Alameda CA 94501-1110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser Alameda MOB

Occupation

Staff Charge Nurse Iii

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : C4609233**

Amount of Each Receipt this Period

5.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

45.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Lynn E. O'Connor**

Mailing Address 1001 Eagle Avenue

City

Alameda

State

CA

Zip Code

94501-1110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser Alameda MOB

Occupation

Staff Charge Nurse Iii

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.00

Date of Receipt

11 / 05 / 2012

**Transaction ID : C4647555**

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. Lynn E. O'Connor**

Mailing Address 1001 Eagle Avenue

City

Alameda

State

CA

Zip Code

94501-1110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser Alameda MOB

Occupation

Staff Charge Nurse Iii

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.00

Date of Receipt

11 / 14 / 2012

**Transaction ID : C4615064**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Lynn E. O'Connor**

Mailing Address 1001 Eagle Avenue

City

Alameda

State

CA

Zip Code

94501-1110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser Alameda MOB

Occupation

Staff Charge Nurse Iii

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.00

Date of Receipt

11 / 16 / 2012

**Transaction ID : C4647879**

Amount of Each Receipt this Period

5.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Pease**

Mailing Address 3403 Gold Candle

City  
Spring

State  
TX

Zip Code  
77388

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609349

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Elizabeth Pease**

Mailing Address 3403 Gold Candle

City  
Spring

State  
TX

Zip Code  
77388

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

Transaction ID : C4647922

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Julie Travis Rogers**

Mailing Address 305 Barrera St

City  
San Antonio

State  
TX

Zip Code  
78210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

Transaction ID : C4609350

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 45  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Julie Travis Rogers**

Mailing Address 305 Barrera St

City

San Antonio

State

TX

Zip Code

78210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647923**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Josephine Romero**

Mailing Address 4211-B S. Fairplay Circle

City

Aurora

State

CO

Zip Code

80014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609364**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Josephine Romero**

Mailing Address 4211-B S. Fairplay Circle

City

Aurora

State

CO

Zip Code

80014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647924**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Raquel Ruiz**

Mailing Address 34518 Venturi Ave

City State Zip Code  
 Beaumont CA 92223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : C4609365**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Raquel Ruiz**

Mailing Address 34518 Venturi Ave

City State Zip Code  
 Beaumont CA 92223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2012

**Transaction ID : C4647925**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Renee Ruiz**

Mailing Address 2104 Spencer St.

City State Zip Code  
 Las Vegas NV 89104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : C4609366**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

40.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Renee Ruiz**

Mailing Address 2104 Spencer St.

City State Zip Code  
 Las Vegas NV 89104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647933**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Teodolinda Sekins**

Mailing Address 2911 Walton Ct

City State Zip Code  
 Pinole CA 94564-1030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser Walnut Creek

Occupation

Staff Nurse li

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 22 / 2012

**Transaction ID : C4609239**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Teodolinda Sekins**

Mailing Address 2911 Walton Ct

City State Zip Code  
 Pinole CA 94564-1030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaiser Walnut Creek

Occupation

Staff Nurse li

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 05 / 2012

**Transaction ID : C4647547**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

40.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 45  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Teodolinda Sekins**

Mailing Address 2911 Walton Ct

City State Zip Code  
Pinole CA 94564-1030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kaiser Walnut Creek

Occupation  
Staff Nurse li

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2012

**Transaction ID : C4647886**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Shawn Shuler**

Mailing Address 29183 10th Ave

City State Zip Code  
Gobles MI 49055-9284

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Borgess Medical Center

Occupation  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 14 / 2012

**Transaction ID : C4615035**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Donna Stern**

Mailing Address 119 Huntington Rd

City State Zip Code  
Hadley MA 01035-9691

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BFMC

Occupation  
RN

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 14 / 2012

**Transaction ID : C4615055**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Brandie A Stewart**

Mailing Address 6705 34th Ave W

City

Bradenton

State

FL

Zip Code

34209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blake

Occupation

RN Specialty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : C4609314**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Brandie A Stewart**

Mailing Address 6705 34th Ave W

City

Bradenton

State

FL

Zip Code

34209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blake

Occupation

RN Specialty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 09 / 2012

**Transaction ID : C4647621**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Brandie A Stewart**

Mailing Address 6705 34th Ave W

City

Bradenton

State

FL

Zip Code

34209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blake

Occupation

RN Specialty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2012

**Transaction ID : C4649668**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 45  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Roselily A Story**

Mailing Address 1624 52nd Street S

City State Zip Code  
 Gulfport FL 33707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Petersburg

Occupation

RN Med/Surg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : C4609317**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Roselily A Story**

Mailing Address 1624 52nd Street S

City State Zip Code  
 Gulfport FL 33707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Petersburg

Occupation

RN Med/Surg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2012

**Transaction ID : C4647624**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Roselily A Story**

Mailing Address 1624 52nd Street S

City State Zip Code  
 Gulfport FL 33707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Petersburg

Occupation

RN Med/Surg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2012

**Transaction ID : C4649688**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Christina Swift**

Mailing Address 4550 N. Wishon Ave

City State Zip Code  
 Fresno CA 97304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NNU

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

11 / 01 / 2012

**Transaction ID : C4609371**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Christina Swift**

Mailing Address 4550 N. Wishon Ave

City State Zip Code  
 Fresno CA 97304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NNU

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

11 / 15 / 2012

**Transaction ID : C4647934**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Judith Tevere**

Mailing Address 21452 Ascot Ln

City State Zip Code  
 Frankfort IL 60423-9430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

.

Occupation

.

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 11 / 2012

**Transaction ID : C4612519**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Nicholas Wirz**

Mailing Address 58 Diablo View Dr.

City State Zip Code  
Orinda CA 94563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

**Transaction ID : C4609367**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. Nicholas Wirz**

Mailing Address 58 Diablo View Dr.

City State Zip Code  
Orinda CA 94563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Labor Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 15 / 2012

**Transaction ID : C4647926**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Cindy Young**

Mailing Address 3332 Seabright Ave

City State Zip Code  
Davis CA 95616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Special Projects Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

**Transaction ID : C4609368**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Cindy Young**

Mailing Address 3332 Seabright Ave

City

Davis

State

CA

Zip Code

95616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA Nurses Asso.

Occupation

Special Projects Coordinator

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 15 / 2012

Transaction ID : C4647927

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10.00

1635.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 45

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

## **A. National Nurses United**

Mailing Address 2000 Franklin Street

City State Zip Code  
 Oakland CA 94612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1037.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2012

**Transaction ID : C4649694**

Amount of Each Receipt this Period

264.13

Reimbursement for administrative and overhead expenses

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

264.13

264.13

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

National Nurses United PAC - A Fund for a Healthy America

### A. SunTrust

Category/  
Type

356.53

State:  District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

356.53

**TOTAL** This Period (last page this line number only).....

356.53

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Bera for Congress**

Mailing Address Post Office Box 582496

City	State	Zip Code
Elk Grove	CA	95758

Purpose of Disbursement  
Contribution

Candidate Name

**Ami Bera**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2012

**Transaction ID : D490039**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Garamendi for Congress**Mailing Address 3605 Long Beach Blvd  
C/O CALIFORNIA POLITICAL LAW, INC.

City	State	Zip Code
Long Beach	CA	90807-6010

Purpose of Disbursement  
Contribution

Candidate Name

**John Garamendi**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2012

**Transaction ID : D490044**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. Horsford for Congress**Mailing Address 6100 Elton Ave  
Ste 1000

City	State	Zip Code
Las Vegas	NV	89107-0123

Purpose of Disbursement  
Contribution

Candidate Name

**Steven Horsford**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2012

**Transaction ID : D490041**

Amount of Each Disbursement this Period

1500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5500.00
---------

--

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. Mark Takano for Congress**

Mailing Address PO Box 5214

City	State	Zip Code
Riverside	CA	92517-5214

Purpose of Disbursement  
Contribution

Candidate Name

**Mark Takano**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 41

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2012

**Transaction ID : D490051**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Nolan for Congress**Mailing Address 1718 E Speedway Blvd  
# 140

City	State	Zip Code
Tucson	AZ	85719-4515

Purpose of Disbursement  
Contribution

Candidate Name

**David F Nolan**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2012

**Transaction ID : D490047**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. PROGRESSIVE VOTERS OF AMERICA**

Mailing Address PO BOX 852

City	State	Zip Code
BURLINGTON	VT	05402

Purpose of Disbursement  
Donation

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2012

**Transaction ID : D490049**

Amount of Each Disbursement this Period

5000.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10000.00
----------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**National Nurses United PAC - A Fund for a Healthy America**

Full Name (Last, First, Middle Initial)

**A. San Diego County Democratic Party (FED. ACCT.)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2012

Mailing Address 8340 Clairemont Mesa Blvd

City	State	Zip Code
San Diego	CA	92111

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type**Transaction ID : D490055**

Amount of Each Disbursement this Period

5000.00
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Taj for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2012

Mailing Address PO Box 871807

City	State	Zip Code
Canton	MI	48187-7507

Purpose of Disbursement  
Contribution

Candidate Name

**Syed Taj**Category/  
Type**Transaction ID : D490053**

Amount of Each Disbursement this Period

2500.00
---------

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2012	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: MI District: 11

Full Name (Last, First, Middle Initial)

**C. Tammy Baldwin for Senate**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2012

Mailing Address PO Box 696

City	State	Zip Code
Madison	WI	53701-0696

Purpose of Disbursement  
Contribution

Candidate Name

**Tammy Baldwin**Category/  
Type**Transaction ID : D490046**

Amount of Each Disbursement this Period

3500.00
---------

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2012	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: WI District: 00

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11000.00
----------

26500.00
----------